Kentucky Department for Public Health Weekly Influenza Surveillance Report Morbidity and Mortality Weekly Report (MMWR) Week 49 December 2 – December 8, 2018



Current Influenza Activity Level: †REGIONAL

† *Regional:* Outbreaks of influenza *or* increases in ILI *and* recent laboratory confirmed influenza in at least two but less than half the regions of the state with recent laboratory evidence of influenza in those regions. **Confirmed*: Influenza laboratory Confirmed Cases are defined by positive molecular virus (RT-PCR) or Virus Culture test results. Those positive test results are reportable in Kentucky. (Positive results for Rapid Influenza Diagnostic Tests are not included in this report).

Influenza-like Illness (ILI) Case Definition:

- Fever (≥ 100°F [37.8°C], oral or equivalent, PLUS Cough -OR-
- Fever (≥ 100°F [37.8°C], oral or equivalent, PLUS Sore Throat -OR-
- Fever (≥ 100°F [37.8°C], oral or equivalent, PLUS Cough and Sore Throat

Activity Level Range: Sporadic Local Regional Widespread

Update for week 49:		Updated Total 2018-2019 Season:	
Lab Confirmed Influenza:	61 Cases	Lab Confirmed Total:	217 Cases
Number of Regions with Long Term Care Facility Outbreaks:	1 of 17 Regions	Total Number of Long Term Care Facility Outbreaks:	1 Outbreak
Number of Regions with Confirmed Flu Cases:	11 of 17 Regions	Total Number of Regions with Confirmed Flu Cases:	15 of 17 Regions
Deaths Reported:	0 (under 18 years) 0 (18 years & older)	Total Deaths Reported:	0 (under 18 years) 2 (18 years & older)
Number of Regions with Increased ILI Activity:	6 of 17 Regions	Number of Regions with ILI Activity this Flu Season:	13 of 17 Regions
Number of Regions with Increased Influenza Activity:	4 of 17 Regions		

^{**}All data are preliminary and may change as more delayed reports are received

Kentucky National Electronic Disease Surveillance System (NEDSS) and U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet) Data. Department for Public Health, Cabinet for Health and Family Services, Frankfort, Kentucky, [December 2 – December 8, 2018].

Weekly Influenza Surveillance Report MMWR Week 49: December 2 – December 8, 2018

Fig 1: Laboratory Confirmed Cases by Age

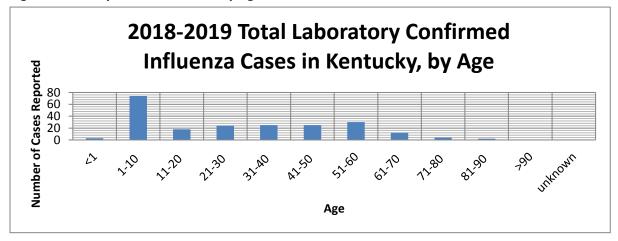


Fig 2: Laboratory Confirmed Cases by Influenza Virus Types

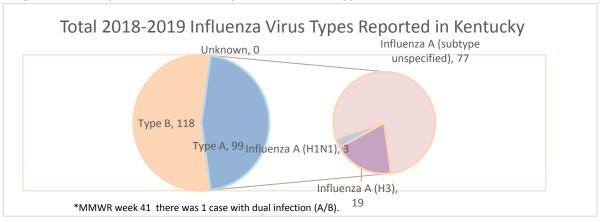
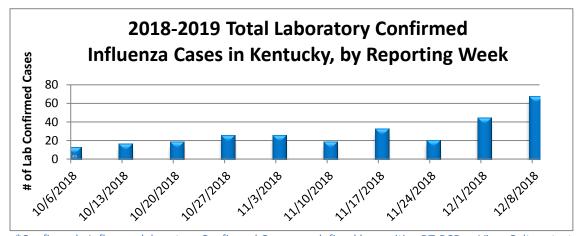
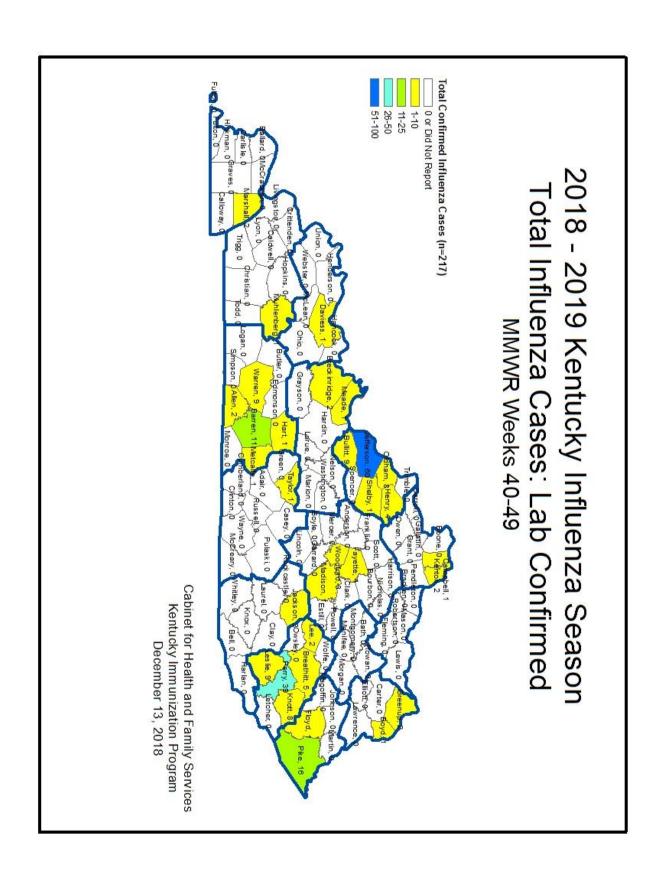


Fig 3: 2018-2019 Total Laboratory Confirmed Influenza Cases in Kentucky, by Reporting Week



^{*}Confirmed: Influenza laboratory Confirmed Cases are defined by positive RT-PCR or Virus Culture test results





National Data 2018-2019 Influenza Season Week 48 ending December 1, 2018

All data are preliminary and may change as more reports are received.

*Week 49 will be available December 20th.

Synopsis:

Influenza activity in the United States increased slightly. Influenza A(H1N1)pdm09, influenza A(H3N2), and influenza B viruses continue to co-circulate, with influenza A(H1N1)pdm09 viruses reported most commonly by public health laboratories since September 30, 2018. Below is a summary of the key influenza indicators for the week ending December 1, 2018:

- Viral Surveillance: Influenza A viruses have predominated in the United States since the beginning of October. The
 percentage of respiratory specimens testing positive for influenza in clinical laboratories remains low, but is increasing.
 - Virus Characterization: The majority of influenza viruses characterized antigenically and genetically are similar to the cell-grown reference viruses representing the 2018–2019 Northern Hemisphere influenza vaccine viruses.
 - Antiviral Resistance: All viruses tested show susceptibility to the neuraminidase inhibitors (oseltamivir, zanamivir, and peramivir).
- o <u>Influenza-like Illness Surveillance:</u> The proportion of outpatient visits for influenza-like illness (ILI) remained at 2.2%, which is at the national baseline of 2.2%. Four of 10 regions reported ILI at or above their region-specific baseline level.
 - ILI State Activity Indictor Map: Two states experienced high ILI activity; two states experienced moderate ILI activity;
 New York City and eight states experienced low ILI activity; and the District of Columbia, Puerto Rico, and 38 states experienced minimal ILI activity.
- Geographic Spread of Influenza: The geographic spread of influenza in one state was reported as widespread; nine states reported regional activity; 18 states reported local activity; the District of Columbia, Puerto Rico, the U.S. Virgin Islands and 22 states reported sporadic activity; and Guam did not report.
- Influenza-associated Hospitalizations: A cumulative rate of 1.3 laboratory-confirmed influenza-associated hospitalizations per 100,000 population was reported.
- Pneumonia and Influenza Mortality: The proportion of deaths attributed to pneumonia and influenza (P&I) was below the system-specific epidemic threshold in the National Center for Health Statistics (NCHS) Mortality Surveillance System.
- Influenza-associated Pediatric Deaths: No influenza-associated pediatric deaths were reported to CDC for week 48.

Weekly U.S. Influenza Surveillance Report. Centers for Disease Control and Prevention. https://www.cdc.gov/flu/weekly/index.htm, Retrieved: 12/13/2018.